

Attorney's Docket Number
LNC -314/97
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my residence, post office address and citizenship are as stated below next to my name;

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I acknowledge my duty to disclose to the Patent and Trademark Office all information known to me to be material to the patentability of this application as defined in Title 37, Code of Federal Regulations, section 1.56; and

I hereby appoint the following attorneys and/or agents to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith;

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DECLARATION AND POWER OF ATTORNEY Patent Application				Attorney's Docket Number	
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<p>Address all telephone calls to 914-945-0198 at telephone No.: (203).</p> <p>Address all correspondence to:</p> <p style="text-align: right;">Christopher J. Capelli, Esq. 75 Pheasant Run Millwood, NY 10546</p> <p>I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.</p>					
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